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Commission on Population and Development
Forty-fifth session
23-27 April 2012
Item 2 of the provisional agenda*
Adoption of the agenda and other organizational matters

Provisional agenda

1. Election of officers.
2. Adoption of the agenda and other organizational matters.
3. Actions in follow-up to the recommendations of the International Conference on Population and Development.
4. General debate on national experience in population matters: adolescents and youth.
5. General debate on the contribution of population and development issues to the theme of the annual ministerial review in 2012.
6. Programme implementation and future programme of work of the Secretariat in the field of population.
7. Provisional agenda for the forty-sixth session of the Commission.
8. Adoption of the report of the Commission on its forty-fifth session.

Annotations

1. Election of officers

Rule 15 of the rules of procedure of the functional commissions of the Economic and Social Council stipulates that the Commission shall elect, from among the representatives of its members, a Chair, one or more Vice-Chairs and such other officers as may be required.

In accordance with its decision 2004/2, the Commission, immediately following the closure of its forty-fourth session, held the first meeting of its forty-fifth session for the sole purpose of electing the new Chair and other officers of the Commission.

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The following officers were elected: Chair: Hasan Kleib (Indonesia); Vice-Chairs: Martina Težak Budišić (Croatia); Sarah Flood-Beaubrun (Saint Lucia); and Pius Wennubst (Switzerland). The election of the Vice-Chair from the Group of African States was deferred. The membership of the Commission at its forty-fifth session is provided in the annex.

2. Adoption of the agenda and other organizational matters

Rule 7 of the rules of procedure of the functional commissions of the Economic and Social Council requires that the Commission shall, at the beginning of each session, adopt the agenda for that session on the basis of the provisional agenda.

On the recommendation of the Commission at its forty-fourth session, the Council, in its decision 2011/247 (see A/66/3, chap. VII.H), approved the provisional agenda and documentation for the forty-fifth session of the Commission.

At its thirtieth session, the Commission decided to authorize its Bureau to hold intersessional meetings in preparation for its sessions on a yearly basis (see E/1997/25, para. 52). At its thirty-ninth session, in its resolution 2006/1 (see E/2006/25, chap. I.B), the Commission requested its Bureau to meet as frequently as necessary in preparation for its annual sessions. The Commission has before it the report of the Bureau on its intersessional meetings.

Documentation

Provisional agenda (E/CN.9/2012/2)

Report of the Bureau of the Commission on Population and Development on its intersessional meetings (E/CN.9/2012/3)

Note by the Secretariat on the organization of work of the session (E/CN.9/2012/L.1)

3. Actions in follow-up to the recommendations of the International Conference on Population and Development

In its resolution 49/128, in which it endorsed the recommendations of the International Conference on Population and Development, the General Assembly decided that the Commission, as a functional commission assisting the Economic and Social Council, would monitor, review and assess the implementation of the Programme of Action of the Conference at the national, regional and international levels and advise the Council thereon.

In the terms of reference of the Commission (see E/1995/27, annex I, sect. I.A), which were endorsed by the Council in its resolution 1995/55, the Commission was called upon to adopt a topic-oriented and prioritized multi-year programme. That work programme would, inter alia, provide a framework for assessing the progress achieved in the implementation of the Programme of Action. In its report on its twenty-eighth session, of which the Council took note in its decision 1995/236, the Commission called for the preparation of annual reports on a selected topic of the Programme of Action (see E/1995/27, annex I, sect. III).

At its twenty-first special session, the General Assembly, in its resolution S-21/2, adopted the key actions for the further implementation of the Programme of Action.

In its decision 2010/101 (see E/2010/25, chap. I.B), the Commission decided that the special theme for the forty-fifth session in 2012 should be "Adolescents and youth".

Documentation

Letter dated 24 May 2011 from the Chargé d'affaires of the Permanent Mission of Indonesia to the United Nations addressed to the Secretary-General (E/CN.9/2012/1)

Report of the Secretary-General on adolescents and youth (E/CN.9/2012/4)

Report of the Secretary-General on the monitoring of population programmes, focusing on adolescents and youth (E/CN.9/2012/5)

Report of the Secretary-General on the flow of financial resources for assisting in the implementation of the Programme of Action of the International Conference on Population and Development (E/CN.9/2012/6)

4. General debate on national experience in population matters: adolescents and youth

The Commission has concluded that it would be useful to make provision in its agenda for a general debate on population matters relating to the theme of the Commission session. Under this item, Governments would report on national experience in meeting the goals and objectives related to adolescents and youth set out in the Programme of Action of the International Conference on Population and Development and would exchange views on ways to accelerate their achievement.

5. General debate on the contribution of population and development issues to the theme of the annual ministerial review in 2012

At its forty-first session, the Commission heard an address by the President of the Economic and Social Council on the various ways in which the Commission might contribute to the new mandates of the Council, in particular the annual ministerial review (see E/2008/25, chap. V). In response, the Commission added this item to its annual agenda. At its forty-fifth session, the Commission will discuss the contributions it could make to the annual ministerial review that the Council will conduct in 2012 on the theme "Promoting productive capacity, employment and decent work to eradicate poverty in the context of inclusive, sustainable and equitable economic growth at all levels for achieving the Millennium Development Goals". The Bureau of the Commission decided to invite the President of the Economic and Social Council to address the Commission under this item in order to launch a discussion on the relevance of population trends in relation to adolescents and youth to the theme of the 2012 annual ministerial review.

6. Programme implementation and future programme of work of the Secretariat in the field of population

At its twenty-eighth session, the Commission suggested that the work programme in the field of population should continue, inter alia, to give high priority to the monitoring of population trends and policies and include the biennial preparation of estimates and projections of global, national, urban, rural and city populations; the conduct of studies on population and related development policies; the preparation of studies on interactions of population change with other development processes;

the conduct of analyses of mortality; contribution to and coordination of in-depth studies on fertility, nuptiality and reproductive rights and health, including family planning; the conduct of studies to improve the understanding of the causes and consequences of internal migration and international migration; increasing public awareness of and information exchange on population and development issues; making the necessary arrangements for coordinating the review and appraisal of the Programme of Action; and the provision of technical cooperation support to developing countries, particularly the least developed countries, and, on a temporary basis, to countries with economies in transition in the light of the economic and social problems that those countries faced at that time (see E/1995/27, annex II). The Commission reaffirmed the content of the work programme at its twenty-ninth session (Commission resolution 1996/1, see E/1996/25, chap. I.C).

At its thirtieth session, the Commission stressed the importance of continuing the basic work of the Population Division of the Secretariat on the crucial underpinnings of population estimates and projections; basic population trends and issues, including fertility, mortality, migration and patterns of rural and urban population change; the evolution of population policies; and understanding of the links between population and development (Commission resolution 1997/3, see E/1997/25, chap. I.C). At its thirty-seventh session, the Commission reaffirmed the importance of the work of the Population Division in providing the United Nations system and the international community with comprehensive and scientifically sound inputs for the analysis of progress made in achieving the goals and objectives on population and development set in the outcomes of major United Nations summits and conferences, especially the Programme of Action of the International Conference on Population and Development, the key actions for its further implementation and the Declaration of Commitment on HIV/AIDS (Commission resolution 2004/1, see E/2004/25, chap. I.B). At the same session, the Commission further emphasized that the Population Division should continue basic work on population estimates and projections; patterns of rural and urban population change; the analysis of international migration; the implications of the changing age structure of the population for development; the increasing diversity of fertility and mortality levels and trends; the interrelations among population, resources, the environment and development; and the evolution of population policies, applying a gender perspective in this regard (Commission resolution 2004/1).

As indicated in the strategic framework for the period 2010-2011 (see A/63/6/Rev.1, programme 7), the objective of the subprogramme on population is to strengthen the international community's capacity to effectively address current and emerging population issues and to integrate the population dimensions into the development agenda at the national and international levels. In paragraph 7.12 of the strategic framework, the Population Division was designated as the entity responsible for the subprogramme and the Division was mandated to achieve that objective by: (a) providing substantive support to United Nations bodies, especially to the Commission, and assessing progress made in the implementation of the Programme of Action of the International Conference on Population and Development and the achievement of the internationally agreed goals, including the Millennium Development Goals; (b) facilitating the discussion of key or emerging population issues by experts or government representatives; (c) preparing comprehensive studies on population issues and population trends relating to fertility, mortality, international and internal migration, HIV/AIDS, urbanization, population growth,

population ageing, population prospects, population policy and population in relation to development; (d) disseminating population information and policy-relevant findings in the area of population, in particular through the Population Division websites; and (e) building capacity to address population issues at the national level through workshops or the dissemination of technical material, such as manuals and software.

The Commission has before it for consideration a note by the Secretary-General on the proposed strategic framework for the period 2014-2015 for subprogramme 6, Population, of programme 7, Economic and social affairs. The Commission is invited to review the proposal and provide its comments thereon. The proposed biennial programme plan, modified as appropriate, will be submitted to the Committee for Programme and Coordination at its fifty-second session. Its recommendations thereon will be transmitted to the General Assembly at its sixty-seventh session, when it will consider the proposed strategic framework for the period 2014-2015.

Documentation

Report of the Secretary-General on programme implementation and progress of work in the field of population in 2011 (E/CN.9/2012/7)

Note by the Secretary-General on the proposed strategic framework for the period 2014-2015: subprogramme 6, Population, of programme 7, Economic and social affairs (E/CN.9/2012/8)

7. Provisional agenda for the forty-sixth session of the Commission

In accordance with rule 9 of the rules of procedure of the functional commissions of the Economic and Social Council, the Commission will have before it the draft provisional agenda for its forty-sixth session, together with an indication of the documents to be submitted under each item and the legislative authority for their preparation, in order to enable the Commission to consider those documents from the point of view of their contribution to the work of the Commission and their urgency and relevance in the light of the current situation.

The attention of the Commission is drawn to Council resolutions 1979/41 and 1981/83 on the control and limitation of documentation. In addition, the Commission is reminded that the Council, in paragraph 1 (j) of its resolution 1982/50 on the revitalization of the Council, urged all its subsidiary bodies to exercise the utmost restraint in making requests of the Secretary-General for new reports and studies and to implement fully the provisions of the decisions of the Council and of the General Assembly with respect to the control and limitation of documentation.

The attention of the Commission is also drawn to paragraph 4 of the annex to Council resolution 1982/50, in which the Secretary-General recommended that: (a) the documentation and programme of work of the subsidiary bodies of the Council and the Assembly be streamlined in order to enable the subsidiary bodies to perform effectively the functions entrusted to them; (b) the Council and the Assembly continue to review the provisional agendas for their subsidiary bodies, together with the list of requested documentation, in order, inter alia, to establish greater consistency in the overall request for documentation and its orderly

consideration at the intergovernmental level, taking fully into account the medium-term plan and the programme budget; and (c) in doing so, the Council and the Assembly also take into account the need for the consolidation of items and documentation for their subsidiary machinery.

Furthermore, in its resolution 1981/83, the Council instructed its subsidiary bodies to take urgent measures to streamline their agendas and programmes of work and to bring about a substantial reduction in their requests for documents, bearing in mind the duration and the cycles of their meetings, and to report to the Council on measures adopted, taking strictly into account the guidelines set forth in the pertinent resolutions and decisions of the Council and the Assembly.

In decision 1983/163, the Council requested the Secretary-General: (a) to bring to the attention of intergovernmental and expert bodies, before decisions were adopted, any request for documentation that exceeded the ability of the Secretariat to prepare and process on time and within its approved resources; and (b) to draw the attention of intergovernmental bodies to areas where duplication of documentation was likely to occur and/or where opportunities for integrating or consolidating documents that dealt with related or similar themes might exist, with a view to rationalizing documentation.

Documentation

Note by the Secretariat containing the draft provisional agenda for the forty-sixth session of the Commission (E/CN.9/2012/L.2)

8. Adoption of the report of the Commission on its forty-fifth session

In accordance with rule 37 of the rules of procedure of the functional commissions of the Economic and Social Council, the Commission shall submit a report to the Council on the work of each session.

Annex

Membership of the Commission on Population and Development at its forty-fifth session (2012)

(47 members; four-year term)

	Term expires at close of session in the year
Algeria	2015
Angola	2014
Bangladesh	2013
Belarus	2013
Belgium	2013
Brazil	2013
China	2014
Colombia	2012
Côte d'Ivoire	2013
Croatia	2012
Cuba	2013
Democratic Republic of the Congo	2013
Ecuador	2015
El Salvador	2015
Finland	2012
Gabon	2015
Georgia	2015
Germany	2013
Ghana	2014
Guatemala	2014
Haiti	2013
Hungary	2014
India	2014
Indonesia	2013
Iran (Islamic Republic of)	2015
Israel	2013
Jamaica	2014
Japan	2012
Kazakhstan	2012
Kenya	2012
Luxembourg	2014

	Term expires at close of session in the year
Malawi	2014
Malaysia	2014
Netherlands	2012
Pakistan	2013
Philippines	2014
Portugal	2015
Russian Federation	2014
Rwanda	2013
Saint Lucia	2014
Senegal	2014
Switzerland	2013
Tunisia	2012
Turkmenistan	2015
Uganda	2012
United Kingdom of Great Britain and Northern Ireland	2014
United States of America	2014

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Adoption of the agenda and other organizational matters

Report of the Bureau of the Commission on Population and Development on its intersessional meetings

I. Introduction

1. At its thirtieth session, in 1997, the Commission on Population and Development authorized its Bureau to hold intersessional meetings in preparation for its sessions on a yearly basis (E/1997/25, para. 52). The Commission subsequently stressed the importance of making available written reports on those meetings at the earliest opportunity (see Commission decision 2005/2) and requested its Bureau to meet as frequently as necessary in preparation for the annual sessions of the Commission (see Commission resolution 2006/1). In accordance with resolution 2006/1, the Bureau held two meetings between September 2011 and January 2012. The first meeting was held at Headquarters on 7 September 2011. The second was held in Yogyakarta, Indonesia, on 18 October 2011.

2. The first meeting of the Bureau was attended by Ambassador Hasan Kleib (Chair), Sarah Flood-Beaubrun, Martina Težak Budišić and Pius Wennubst. At the time of the first meeting the African Group had not yet designated its representative. Present at the second meeting of the Bureau were Ambassador Kleib, William Awinador-Kanyirige, Ms. Težak Budišić and Mr. Wennubst. The Director of the Population Division of the Department of Economic and Social Affairs, other staff members of the Population Division and representatives of the United Nations Population Fund (UNFPA) were present at both meetings of the Bureau.

3. The present report summarizes the discussions of the Bureau at those meetings, including the conclusions reached and the recommendations made.

* E/CN.9/2012/2.

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II. Summary of the deliberations of the Bureau

A. Organization of work for the forty-fifth session of the Commission

4. The Bureau reviewed the organization of work for the forty-fifth session and suggested that two representatives of youth be invited to address the Commission on the first day of the session, Monday, 23 April, preferably from noon to 1 p.m. The presentation by the first keynote speaker for that day would therefore be shifted to the slot between 3 p.m. and 4 p.m. and the informal consultations on draft proposals would begin at 4 p.m.

B. Keynote speakers

5. In its decision 2005/2, the Commission welcomed the format of inviting keynote speakers to address the sessions of the Commission and requested the Bureau to make the necessary arrangements for their participation and to inform States members of the Commission accordingly. Pursuant to that decision, the Bureau decided that three expert keynote speakers would be invited to address the Commission on the special theme for the forty-fifth session, "Adolescents and youth", and that each speaker would be allotted an hour to make a presentation and to have an interactive dialogue with members of the Commission. The Bureau selected Shireen Jejeebhoy, Andrew Mason and George C. Patton as keynote speakers. Ms. Jejeebhoy, Senior Associate at the Population Council in New Delhi, was invited to speak on "Ensuring the sexual and reproductive health of adolescents and youth". Mr. Mason, Professor of Economics at the University of Hawaii, was asked to speak on "Adolescents and youth: their numbers and economic roles". Mr. Patton, Professor of Adolescent Health Research at the University of Melbourne, was requested to speak on "The promise and potential of adolescent and youth health". As is customary, the Bureau recommended that the working group be adjourned during the presentations made by keynote speakers.

6. The Bureau also decided to include an additional speaker slot for two representatives of youth, one female and one male, on the first day of the resumed session in order to ensure that the Commission could benefit from the perspectives of young people while it was considering the theme "Adolescents and youth". The Bureau considered that the presentations should be made early in the session in order that they would inform the deliberations held during the rest of the session.

C. Participation of relevant United Nations entities in the forty-fifth session of the Commission on Population and Development

7. The Bureau noted that the topic of the forty-fifth session was relevant to the work of many entities of the United Nations system, in particular the United Nations Children's Fund, the United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women), the World Health Organization and the World Bank. With this in mind, the Bureau requested that the Chair of the Commission encourage relevant agencies, funds and programmes of the United Nations system to participate in the forty-fifth session and invite them to consider organizing side events during the session. As at other sessions of the Commission,

the Bureau welcomed the involvement of UNFPA in organizing a side event for the session.

D. Communication of the Chair with members of the Commission

8. The Bureau requested its Chair to write to all members of the Commission underscoring the need to include youth representatives as members of their delegations to the forty-fifth session. The Chair was also asked to request that delegations include technical experts on the demographic aspects of adolescence and youth. The Chair noted that he would also outline in his letter the relevance of the various items on the provisional agenda of the forty-fifth session and would include information about how to access preliminary versions of the documentation for the session. The Bureau agreed with his suggestions.

9. The Bureau also recommended that the Chair send an informational note to Member States not members of the forty-fifth session of the Commission to alert them of the dates and the theme of the session and to inform them of how to access the documentation for the session.

E. Relationship between the Commission on Population and Development and the Economic and Social Council

10. The Bureau discussed ways to ensure the contribution of the Commission to the annual ministerial review conducted during the high-level segment of the annual meeting of the Economic and Social Council, which, in 2012, would focus on the theme "Promoting productive capacity, employment and decent work to eradicate poverty in the context of inclusive, sustainable and equitable economic growth at all levels for achieving the Millennium Development Goals". The Bureau noted that since ensuring the access of young people to decent work and employment was a major challenge in many countries, considering whether and how demographic dynamics reduced or increased that challenge would be of interest. Consequently, the Bureau noted that it was important to increase the synergies between the work of the Commission and the annual ministerial review. To that end, the Bureau suggested that, as at previous sessions of the Commission, the Permanent Representatives of Member States planning to make national presentations at the annual ministerial review be invited to participate in the general debate on the contribution of population and development issues to the theme of the annual ministerial review in 2012 (item 5 of the agenda for the forty-fifth session) so that they might be able to discuss the relevance of population trends among adolescents and young people to the theme.

11. The Bureau also endorsed the suggestion of the Chair that the President of the Economic and Social Council be invited to launch the discussion on agenda item 5, as had been done at prior sessions of the Commission.

F. Resolutions and decisions

12. The Bureau recommended that the Commission consider adopting a decision on the draft agenda for its forty-sixth session and a resolution on the special theme of the forty-fifth session, "Adolescents and youth".

13. As at previous sessions, the Bureau recommended that a working group be established at the start of the resumed forty-fifth session of the Commission to discuss proposals that might result in the adoption of resolutions or decisions. The Bureau suggested that the working group begin its work on the afternoon of the first day of the resumed session of the Commission. The Bureau also recommended that the Chair of the Commission distribute initial drafts of resolutions and decisions in order to facilitate the deliberations of the working group and also requested that the Chair's drafts be made available to members of the Commission and to the regional groups three weeks prior to the resumption of the forty-fifth session of the Commission.

14. The Bureau also suggested that the Commission might wish to consider requesting that the special session of the General Assembly in 2014, which will be devoted to a review of the status of implementation of the Programme of Action of the International Conference on Population and Development, be scheduled immediately before the general debate of the Assembly in order to maximize participation at the highest possible level.

G. Briefing for members of the Commission

15. The Bureau recommended that, at least three weeks prior to the resumption of the forty-fifth session, the Director of the Population Division organize a briefing for delegations on the status of documentation for the session, the organization of work and the resolutions and decisions likely to be considered by the Commission.

16. The Bureau stressed the importance of the timely availability of documents for the forty-fifth session of the Commission in order to facilitate the preparation of statements by delegations. The Bureau endorsed posting advanced unedited versions of such documentation on the Internet in English.

III. Conclusions and recommendations

17. **The Bureau recommended the adoption of the draft organization of work for the forty-fifth session of the Commission.**

18. **The Bureau decided that three keynote speakers and two youth representatives would be invited to address the Commission on the special theme of the forty-fifth session, "Adolescents and youth".**

19. **The Bureau decided to invite the President of the Economic and Social Council to address the Commission under item 5 of the provisional agenda of the forty-fifth session and to invite the Permanent Representatives of Member States making national presentations at the annual ministerial review in 2012 to participate in an interactive dialogue on the relevance of population issues in promoting productive capacity, employment and decent work to eradicate**

poverty in the context of inclusive, sustainable and equitable economic growth at all levels for achieving the Millennium Development Goals.

20. **The Bureau recommended that the Commission consider adopting a decision on the agenda for the forty-sixth session and a resolution on the special theme of the forty-fifth session, "Adolescents and youth".**

21. **The Bureau suggested that the Commission consider requesting that the special session of the General Assembly in 2014 devoted to a review of the status of implementation of the Programme of Action of the International Conference on Population and Development be scheduled immediately before the general debate of the Assembly in order to maximize participation at the highest possible level.**

22. **The Bureau recommended that a working group be established at the start of the resumed forty-fifth session of the Commission in order to discuss issues that might result in the adoption of resolutions or decisions and that the working group begin its work on the afternoon of the first day of the resumed session of the Commission.**

23. **The Bureau requested that the Chair of the Commission distribute initial drafts of resolutions and decisions in order to facilitate the deliberations of the working group. The Bureau requested that the Chair's drafts be made available to members of the Commission and to the regional groups three weeks prior to the resumption of the forty-fifth session.**

24. **The Bureau recommended that, at least three weeks prior to the resumption of the forty-fifth session of the Commission, the Director of the Population Division organize a briefing for delegations on the status of documentation for the session, the organization of work and the resolutions and decisions likely to be considered by the Commission.**

25. **The Bureau requested that the Chair of the Commission write to all members of the Commission underscoring the need to have technical experts as part of their delegations and to include representatives of youth in their delegations.**

26. **The Bureau requested that the Chair write to Member States not members of the forty-fifth session of the Commission in order to alert them of the dates and theme of the session and to inform them of how to access the documentation for the session.**

27. **The Bureau also requested the Chair of the Commission to encourage relevant agencies, funds and programmes of the United Nations system to participate in the forty-fifth session and to invite them to organize side events during the session.**

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Actions in follow-up to the recommendations of the International Conference on Population and Development

Adolescents and youth

Report of the Secretary-General

Summary

The present report is submitted pursuant to decision 2010/101 of the Commission on Population and Development, in which the Commission decided to consider in 2012 the theme of adolescents and youth. The report presents an overview of the demography of adolescents and youth, describing current and expected trends for that population; their experience in regard to marriage, childbearing and the use of contraception; challenges to their health and survival; and their participation in international migration. The report also presents recommendations for action to ensure that young people have access to the services and guidance they need to make crucial life transitions safely and participate more fully and effectively in society. Those recommendations would also contribute to accelerating the achievement of the goals and objectives of the Programme of Action of the International Conference on Population and Development in regard to adolescents and youth.

* E/CN.9/2012/2.

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I. Introduction

1. Adolescence is the period of transition between childhood and adulthood. Adolescence is considered to begin with puberty, a process of physical, psychological and emotional development triggered by a cascade of endocrine changes that lead to sexual maturation and reproductive capability. In girls, a key marker of puberty is menarche — the first menstruation — but there is no such clear marker in boys. In girls, the mean age at menarche is between 12 and 13 years in developed countries,[1] and it is likely similar or higher in developing countries. In boys, signs of sexual maturation become evident at around 13 or 14 years of age. Among both girls and boys, the start of puberty can vary by four or five years around the mean. Although puberty generally lasts two to four years, there is no strict definition of when adolescence begins and ends. In many societies, adolescents and young people are expected to remain in school for long periods and legal provisions set the age of majority generally at age 18 or higher, therefore, one approach to determining the period of adolescence would be to focus on persons aged 12 to 17 years.

2. Similarly, there is no established definition of youth. In preparing for the first International Youth Year in 1985, however, the report of the Advisory Committee for the International Youth Year (A/36/215, annex) noted the following: "A chronological definition of who is young, as opposed to who is a child or who is an adult, varies with each nation and culture. However, the United Nations, for statistical purposes, defines those persons between the ages of 15 and 24 as youth without prejudice to other definitions by Member States." The use of 15 as the lower bound for youth, instead of 18, was indeed driven by statistical considerations, since data are very often available only in terms of age groups that span five years. In practice, studies on adolescents and youth have defined those groups flexibly. The main focus in the present report is on young people aged 12-24, but the term "adolescents and youth" will refer to varying age groups owing to data limitations.

3. Among the 1.6 billion persons aged 12-24 in 2012, 0.85 billion are aged 18-24. The overall number of adolescents and youth is expected to change little over the coming decade and, provided that fertility and mortality levels in developing countries continue to decline, may remain relatively stable over the rest of the century. The population aged 12-24 is still increasing rapidly in Africa, however, while it is declining, or will soon decline, in all other regions. Consequently, the proportion of the world's adolescents and youth living in Africa is expected to rise from 18 per cent in 2012 to 28 per cent by 2040, while the shares of all other regions will decline. The region comprising Asia and the Pacific is expected to experience the sharpest decline, from 61 per cent in 2012 to 52 per cent by 2040.

4. Most adolescents and youth live in a different world from that in which their parents grew up. Compared to young people 20 years ago, adolescents in 2012 are healthier and more likely to spend their adolescence in school, to postpone entry into the labour force and to delay marriage and childbearing. Because change is not happening at the same pace everywhere, however, there are also growing disparities among adolescents and youth within and across countries. In particular, young people who live in poverty face major disadvantages. They are more likely to work

[1] G. C. Patton and R. Viner, "Pubertal transitions in health", *The Lancet*, vol. 369, No. 9567 (March 2007).

as children, to never attend school or to drop out of it, to engage in risky sexual behaviours and to marry and bear children early.

5. To reduce disparities among young people, it is urgent to focus on the services that can make major differences in their lives. Declining fertility and improvements in child health have increased demand for schooling. Ensuring universal primary education and expanding enrolment at the secondary level can yield many dividends, especially with regard to improving skills for productive employment, reducing risky behaviours and developing habits that can influence health for the rest of young people's lives. To reap the greatest benefits from education, both its length and contents are important. More than ever before, young people need not only to be taught, but to be active participants in learning and to develop the behavioural skills that living in rapidly changing societies requires.

6. The adolescents and youth of today are central to realizing development that is sustainable and equitable. Greater investments in their education, health and labour market opportunities can shape the well-being of tomorrow's adults and, in the process, ultimately narrow the gaps between countries with regard to human development. The present report provides a demographic overview of adolescents and youth, beginning with their numbers and share of the working-age population because the absolute and relative sizes of youth cohorts have consequences for the demands placed on public sector services and the supply of labour. The report also describes their family formation patterns, sexual and reproductive health, main causes of morbidity and mortality and selected aspects of migration, and presents recommendations to improve outcomes for adolescents and youth in those key population-related areas.

II. Trends in the population of adolescents and youth

7. Globally, the number of adolescents and young people is at an all-time high,[2] but that number might not increase much more in coming decades if global fertility continues to decline. In 2012, the world had 1.6 billion persons aged 12-24, of which 721 million were adolescents aged 12-17 and 850 million were youth aged 18-24 (see table 1). Provided that global fertility and mortality continue to decline, the numbers in both age groups are projected to remain within narrow ranges during the rest of the century, varying between 721 million in 2015 and a peak of 762 million in 2030 in the case of adolescents, and between 835 million in 2020 and 884 million in 2065 in the case of youth. In 2040, the world is expected to have 755 million adolescents and 883 million youth.

[2] All estimates presented in sect. II are derived from *World Population Prospects: The 2010 Revision — Extended Dataset* (United Nations publication, Sales No. 11.XIII.7), DVD.

Table 1
Population aged 12-24 by region, 2012 to 2100
(Millions)

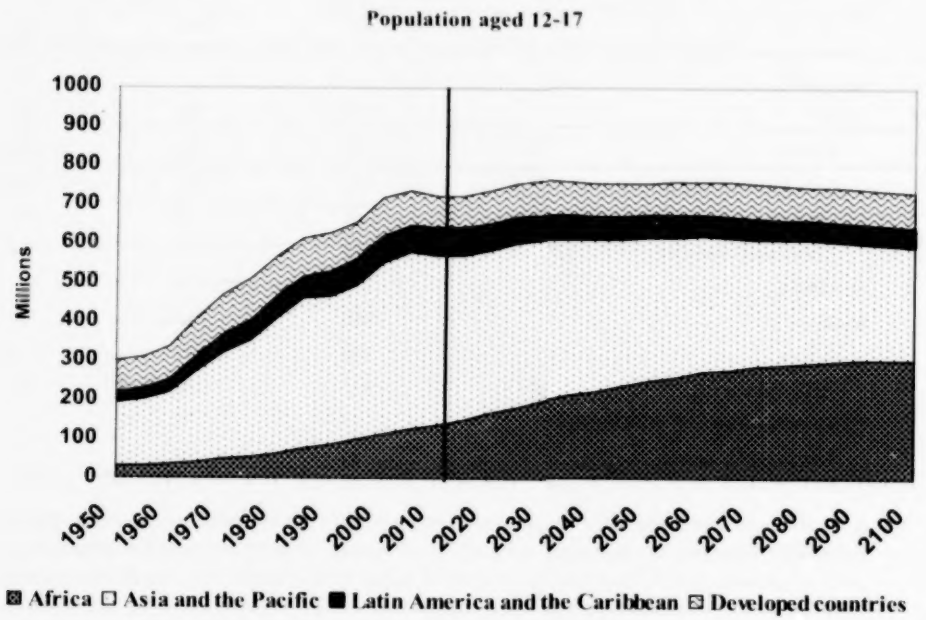
	2012	*2040*	*2100*
Age 12-17			
World	721	755	731
Africa	142	225	305
Asia and the Pacific	432	387	293
Latin America and the Caribbean	66	58	43
Developed countries	82	85	90
Age 18-24			
World	850	883	859
Africa	144	241	353
Asia and the Pacific	521	469	349
Latin America and the Caribbean	74	70	51
Developed countries	111	104	106

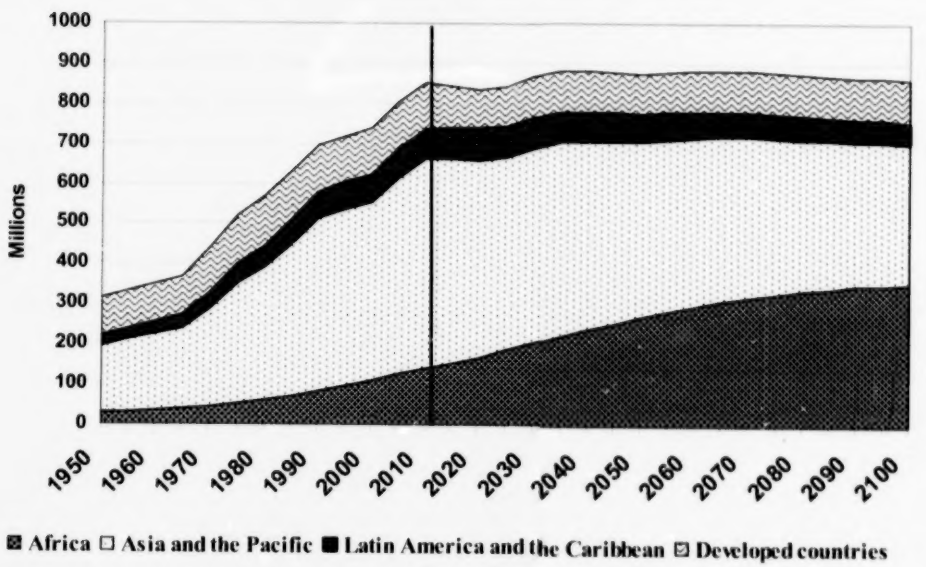
8. The relative stability of global numbers of adolescents and youth masks important changes by region (see figure I). Whereas in most regions the numbers of both adolescents and youth are expected to decline or change little over the coming decades, they will increase markedly in Africa (by 62 per cent and 70 per cent by 2040, respectively). As a result, Africa's share of the world's adolescents and youth will rise from 18 per cent in 2012 to 28 per cent in 2040, and could reach 41 per cent by 2100. The fast growth in the number of young people in Africa will likely have profound social and economic implications because it is occurring in places where the proportion of youth who are unemployed and the proportion of working youth who are poor are higher in comparison with adults.[3]

[3] International Labour Office, *Global Employment Trends 2012: Preventing a Deeper Jobs Crisis* (Geneva: International Labour Office, 2012).

Figure I

Regional distribution of the population of adolescents and youth, 1950-2100



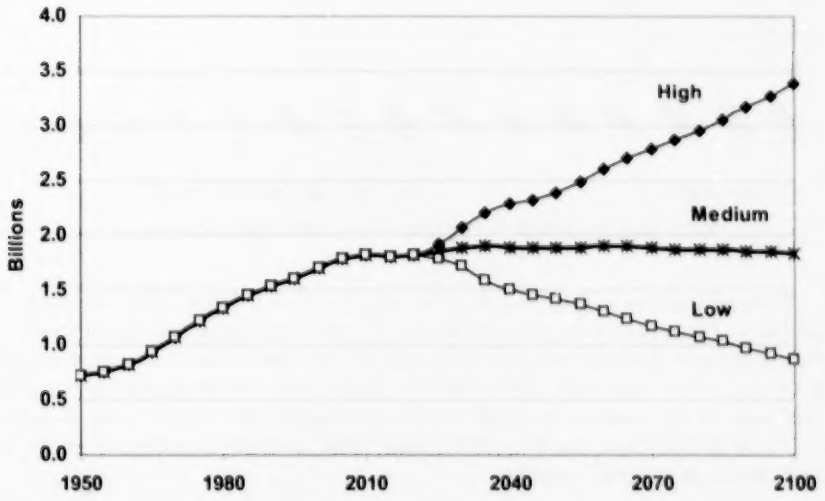


9. The population aged 12-24 is declining or will soon decline in all major regions except Africa. In developed countries the number of adolescents and youth is falling fast, at -1.4 per cent annually. Increases in fertility in recent years plus net migration gains at younger ages, however, will reduce the speed of decline and even lead to short periods of growth in the future. In Asia and the Pacific, the population aged 12-24 is declining at -0.6 per cent annually and reductions are projected over the foreseeable future. In Latin America and the Caribbean, the number of adolescents and youth is increasing slowly, at 0.2 per cent annually, but is projected to decline at an accelerating rate after 2015.

10. In sharp contrast, the population aged 12-24 in Africa is rising at 1.9 per cent annually and will continue to grow rapidly well beyond 2040 even if Africa's fertility falls from 4.5 children per woman today to 3.1 children per woman by 2040. A slower fertility decline will produce a more rapid increase of that population.

11. The future stabilization of the number of adolescents and youth is not assured. Even small differences in future fertility can mean major changes in their numbers. For the population aged 10-24[4] to fluctuate between 1.8 billion and 1.9 billion over the rest of the century, global fertility must drop from 2.5 children per woman in 2010 to 2.0 in 2100. If future fertility were to remain at a rate of just 0.5 children per woman higher than those levels, the population aged 10-24 could rise to 2.3 billion in 2040 and 3.4 billion in 2100. If fertility were to drop faster and remain at a rate of about 0.5 children per woman lower than the path described above, the population aged 10-24 could decline to 1.5 billion by 2040 and to 0.9 billion by 2100 (see figure II).

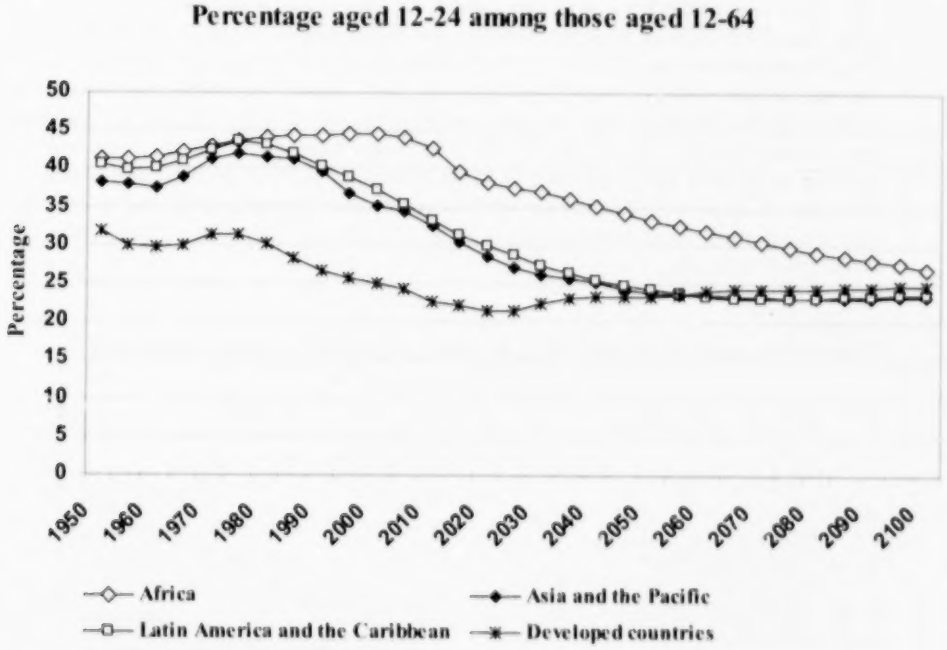
Figure II
Population aged 10-24 according to three projection variants, 1950-2100



[4] Data for different fertility projection variants are available only for five-year age groups.

12. There is concern about the high proportion of young people in the population, yet globally that proportion peaked in 1985 at 26 per cent. As a share of the "working-age" population aged 12-64, they reached a maximum in 1975 at 39 per cent. That year, both Asia and the Pacific and Latin America and the Caribbean also saw their share of young people aged 12-24 among persons aged 12-64 peak, at 42 and 44 per cent respectively. In developed countries the maximum was reached in 1970 at 31 per cent. Even in Africa, the share of young people in the working-age population was highest in 2000, at 45 per cent. Today, the share of those aged 12-24 among persons aged 12-64 is decreasing in all regions and is expected to continue dropping, provided the reduction of fertility in developing countries continues (see figure III).

Figure III
Population aged 12-24 as a percentage of that aged 12-64, 1950-2100



13. Currently, persons aged 12-24 still comprise a major share of the working-age population. That share is highest in Africa (43 per cent), followed by Asia and the Pacific and Latin America and the Caribbean (33 per cent in each) and by developed countries (23 per cent). By 2040, persons aged 12-24 are projected to constitute 27 per cent of the population aged 12-64 worldwide, with 35 per cent in Africa, 25 per cent in both Asia and the Pacific and Latin America and the Caribbean, and 23 per cent in developed countries.

14. Globally, males outnumber females among people aged 12-24, with 106 males for every 100 females. The proportion of males is lowest in Africa and in Latin

America and the Caribbean, at 102, and highest in Asia and the Pacific at 109. In developed countries the proportion of males among young people is 105.

III. Marriage

15. Marriage is a major milestone on the path to adulthood. Historically, in most societies marriage marked the start of a couple's reproductive life. Currently, societies vary considerably with respect to whether or not marriage coincides with the beginning of childbearing. In addition, consensual unions have been a common alternative to marriage in many societies and the date of their formation may not be as clear as that of formal marriage.

16. When life expectancy was low, many children died early in childhood and maternal mortality was high, societies encouraged early marriage to maximize the reproductive life of couples. Today, life expectancy is high by historical standards in all countries and the vast majority of children survive to adulthood. Moreover, the importance of providing a minimum period of schooling to all children is a universally shared goal. As the years of mandatory schooling increase and societies provide more options for young people to work and be productive, the aspirations of young people rise and they tend to postpone marriage. In addition, it is well established that bearing children too early in life carries greater risks for both mothers and children. Societies have acknowledged that it is better to postpone marriage until women and men reach adulthood by adopting laws setting a minimum age at marriage. Thus, among the 187 countries with information on the minimum legal age at marriage, 158 allow women to marry without parental consent at age 18 or higher and 180 allow men to marry without parental consent at age 18 or higher.

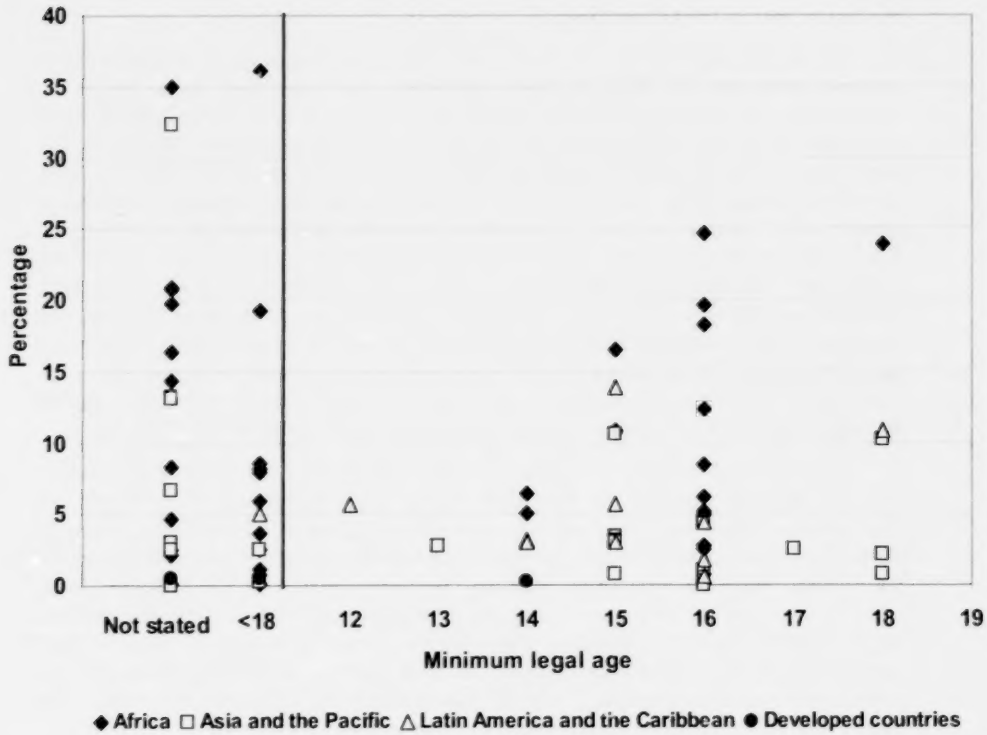
17. Although the majority of countries forbid women from marrying before age 18 without parental consent or the approval of a pertinent authority, there are 29 countries where marriage without such approval can occur earlier. Sixteen of those countries are in Asia and the Pacific, seven are in Africa and two are in the Caribbean, while the remaining four are developed countries. In seven of those countries, women as young as 15 can marry without parental consent. In addition, the laws of at least 146 countries allow women under 18 to marry provided their parents or a pertinent authority approve and in at least 27 of those countries the age at marriage can be lower than 15. In the case of men, 107 countries allow marriage before age 18 with the consent of parents or a pertinent authority.

18. In a number of countries a significant proportion of women marry at very young ages either because their laws allow early marriage with parental consent or because enforcement of the minimum legal age at marriage is lax. In some countries, laws might include exceptions for some ethnic or religious groups or forms of marriage. Data from recent surveys conducted in 80 countries indicate that in 23 of them at least 10 per cent of women aged 20-24 at the time of the interview had married before age 15. Among those countries, 16 were in Africa, 5 were in Asia and the Pacific and 2 were in Latin America and the Caribbean. The association, however, between the percentage of women marrying at young ages and the minimum age at marriage allowed with parental consent is weak (see figure IV). Even when the minimum age at marriage with parental consent was 15 or 16, several countries had a high proportion of young women who had married before age 15. Furthermore, in countries where no minimum age was stipulated for women

marrying with parental consent, the percentage of young women married before age 15 varied markedly. This evidence suggests that legislative action is not sufficient to reduce the prevalence of early marriage among women. When parents allow or even promote the early marriage of their young daughters, delaying marriage hinges on changing the views of parents regarding the acceptability of early marriage and addressing the real or perceived benefits associated with it.

Figure IV

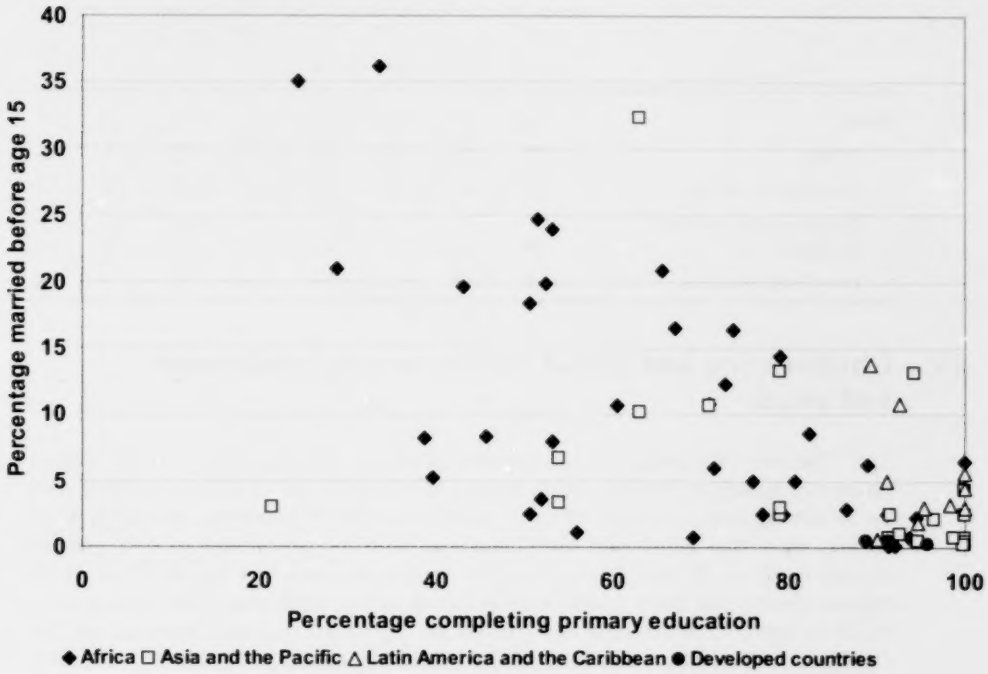
Percentage of women aged 20-24 who married before age 15 versus minimum legal age at marriage with parental consent, by region



19. When girls have access to education they are less likely to marry early. Thus, the higher the level of illiteracy among women aged 15-24, the higher the propensity to marry early. Furthermore, the percentage of women aged 20-24 who had married before age 15 tends to be higher in countries with a low proportion of girls completing primary education (see figure V) and, according to surveys, the propensity of women to marry early is higher among women with no education or primary education than among those with secondary education. When societies value the education of girls, marriages tend to be delayed.

Figure V

Percentage of women aged 20-24 who married before age 15 versus percentage of girls completing primary education, by region



20. Globally, the age at marriage has been increasing and, consequently, the proportion of young people who have ever been married has been decreasing (see table 2). In 1990, 18 per cent of women aged 15-19 had ever been married, but by 2005 only 15 per cent had. For men, the equivalent proportions were 4 per cent and 2 per cent, respectively. At ages 20-24, the proportion of ever-married young people declined from 60 per cent to 51 per cent among women and from 31 per cent to 23 per cent among men. Differences in the timing of marriage among regions are marked, especially for women. In 2005, the regions with the highest percentage of ever-married women among those aged 15-19 were West and Middle Africa, at 33 per cent and 29 per cent, respectively, South Asia at 28 per cent, East Africa at 26 per cent and Central America at 20 per cent. In contrast, delayed marriage in developed countries has meant that even, among women 20-24, only 26 per cent have ever been married or have lived in a consensual union. The postponement of marriage is also common in Southern Africa and East Asia, where only 23 per cent and 37 per cent, respectively, of women aged 20-24 in 2005 had ever been married.

Table 2
Percentage ever married or in consensual union, 1990 and 2005

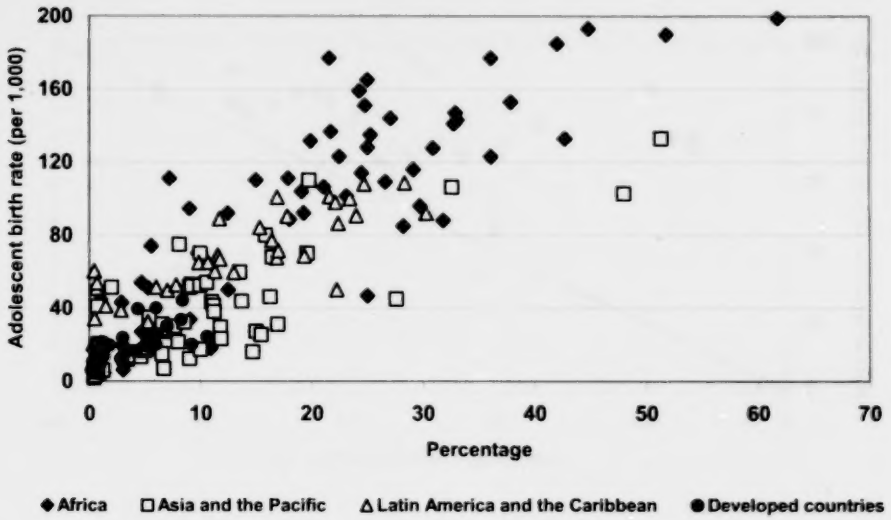
	Women				*Men*			
	1990		*2005*		*1990*		*2005*	
	15-19	*20-24*	*15-19*	*20-24*	*15-19*	*20-24*	*15-19*	*20-24*
World	18	60	15	51	4	31	2	23
Africa	27	65	24	61	4	25	2	21
Asia and the Pacific	19	66	15	56	5	36	2	24
Latin America and the Caribbean	16	52	16	48	4	32	4	32
Developed countries	5	37	4	26	1	19	2	14

IV. Childbearing and sexual activity among adolescents and youth

21. The start of marriage or a consensual union is generally related to the wish to procreate, therefore fertility levels among adolescents are closely associated with the percentage who are married or in union. Data for 82 countries, including 42 in Africa, show that adolescent birth rates rise with the percentage of ever-married women aged 15-19 (see figure VI). The adolescent birth rate has declined in all regions since 1990, but it is still high in Africa at 101 births per 1,000 women aged 15-19 in 2008, in South Asia at 77 births per 1,000 and in Latin America and the Caribbean at 73 births per 1,000. Globally, the adolescent birth rate was 56 births per 1,000 in 2008 — more than double that of developed countries, which was 24 births per 1,000.[5]

[5] *World Population Prospects.*

Figure VI
Adolescent birth rate versus the percentage of ever-married women aged 15-19



22. Young mothers account for important proportions of all births. In 2010, 12 per cent of the 135 million children born that year were born to women aged 15-19, and a further 32 per cent were born to women aged 20-24. In Africa and in Latin America and the Caribbean, 15 and 18 per cent, respectively, of all children were born to young mothers aged 15-19. In Asia and the Pacific and in Latin America and the Caribbean, 47 per cent of all children were born to women aged 15-24, and in Africa, the figure was 42 per cent. Young mothers' share of all births was lower in developed countries, at 25 per cent.[5]

23. In many societies young people become sexually active before marriage. Data for 53 countries, including 31 in Africa, indicate that the share of women beginning sexual activity before marriage is large. Thus, the percentage of women aged 20-24 at the time of interview who reported having begun sexual activity before age 20 is generally higher than the percentage who married before age 20 (see figure VII), with the exception of a few countries in Asia. Because contraceptive use is low among adolescent women, early initiation of sexual activity, whether after marriage or before, is associated with higher levels of adolescent fertility (see figure VIII).

Figure VII

Percentage of women aged 20-24 who were sexually active before age 20 versus those who married before age 20

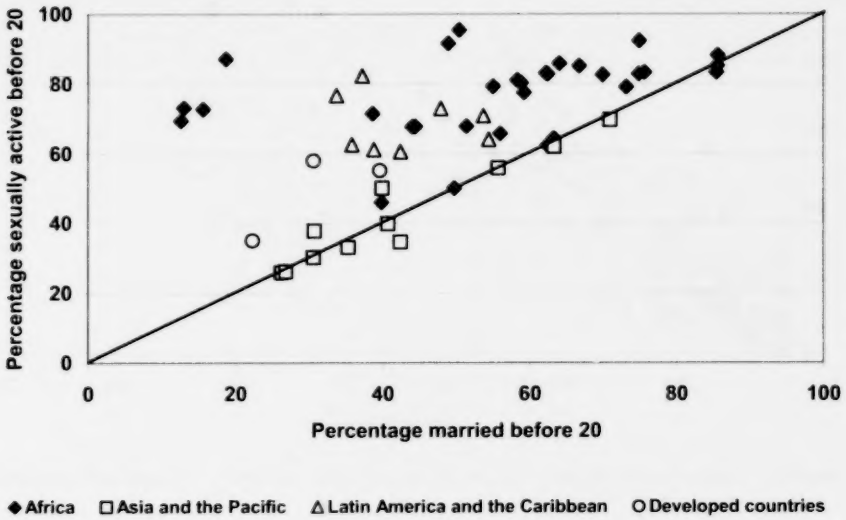
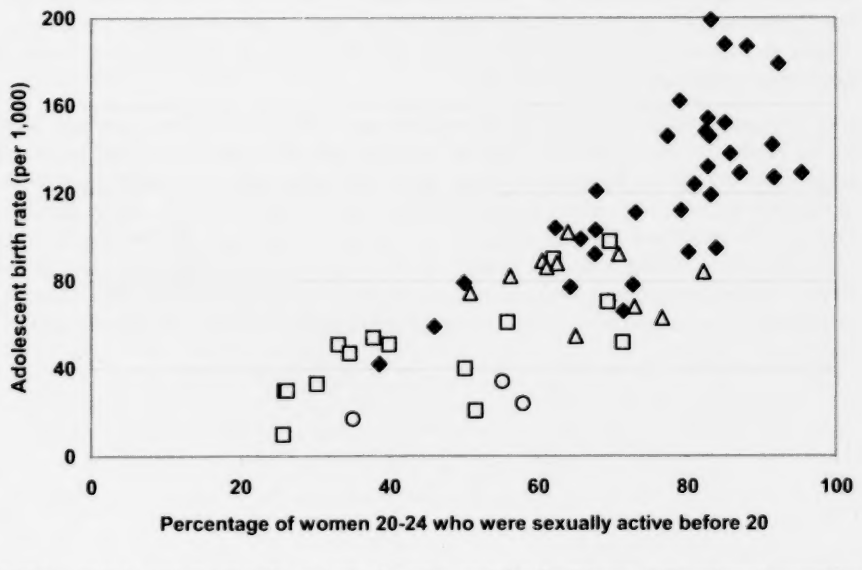


Figure VIII

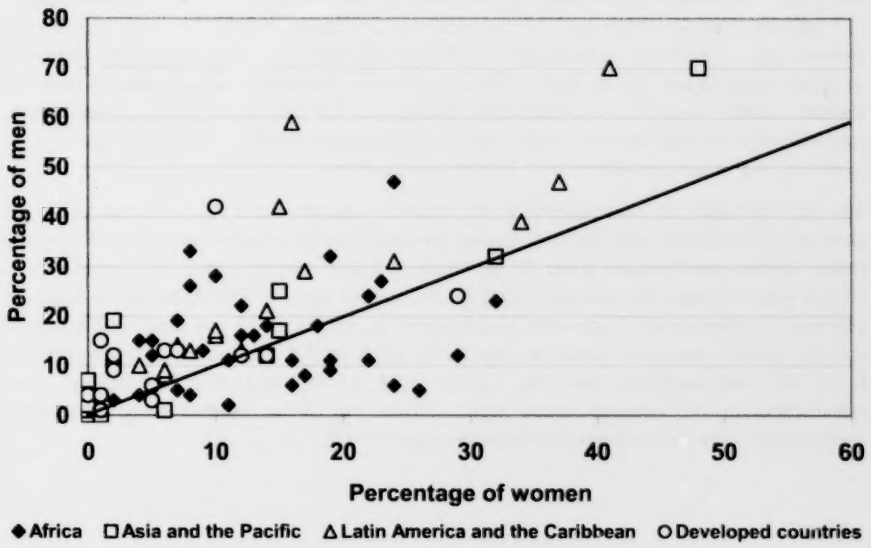
Adolescent birth rate versus the percentage of women aged 20-24 who were sexually active before age 20



24. In many countries, sexual activity begins in early adolescence, before age 15, and males tend to start earlier than females. In the 82 countries reporting data (mainly in Africa and in Latin America and the Caribbean), the percentage of males aged 15-19 who became sexually active before age 15 surpasses that of females in 55 countries (see figure IX). In 27 of the countries considered, at least 15 per cent of adolescent females had become sexually active by age 15 and in 36 countries, at least 15 per cent of adolescent males had done so. Initiation of sexual activity in early adolescence has been linked to a higher likelihood that coercion or force was used than when sexual activity begins at older ages, and such coercive experiences are associated with a host of negative outcomes, such as risky sexual behaviours that heighten the likelihood of unintended pregnancy or sexually transmitted infections, including HIV, as well as mental health disorders, such as anxiety, depression and suicide.

Figure IX

Percentage of men versus women aged 15-19 who became sexually active before age 15



V. Family planning

25. Data on family planning among adolescents and youth is mostly limited to developing countries.[6] The 64 recent surveys with relevant data are representative of 26 per cent of all women aged 15-24 globally, but they represent 43 per cent of young women in Africa, 27 per cent in Asia and 29 per cent in Latin America and

[6] The estimates presented in sect. V were derived from the most recent demographic and health surveys conducted by Measure DHS, which refer mostly to data from 2005 or later. Available from www.measuredhs.com/data/STATcompiler.cfm.

the Caribbean. The present section is based mainly on the results of those surveys and, consequently, focuses mostly on developing countries.

26. About half of married young women wish to have children soon. Thus, among the currently married women aged 15-19 included in the 64 surveys, 56 per cent wish to have a child soon or are intentionally pregnant, 20 per cent are using contraception and 24 per cent do not wish to get pregnant but are not using any method of contraception, implying that their need for contraception is unmet. Among married women aged 20-24, 42 per cent are or wish to get pregnant, 37 per cent use contraception and 21 per cent have an unmet need for contraception.

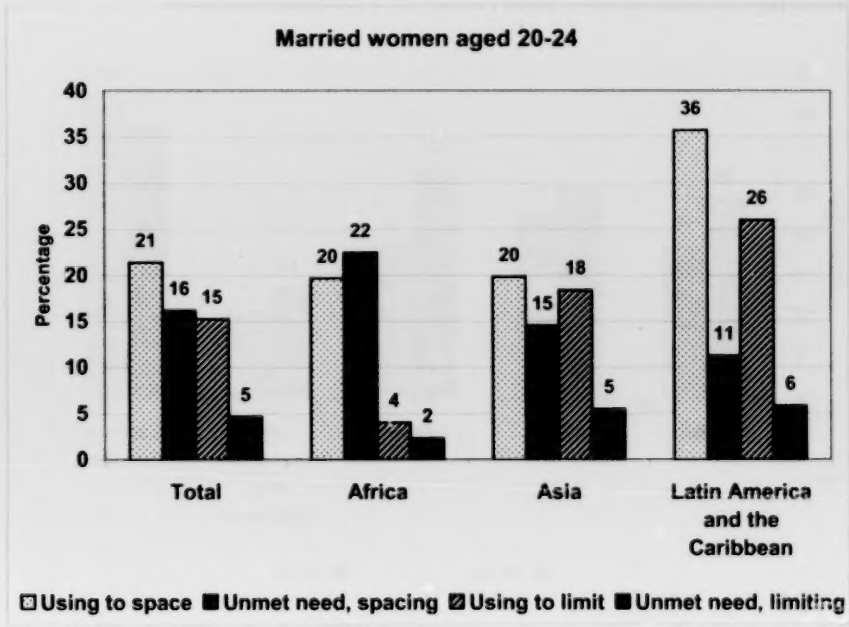
27. In both Africa and Asia, the number of young women who are pregnant or wish to become pregnant is higher than the number using contraception. Thus, in 26 African countries and 11 Asian countries, out of the 64 countries reporting data, that pattern holds among married women aged 15-19, as it does in 20 countries in Africa and 3 in Asia among married women aged 20-24. In contrast, in all Latin American countries reporting data, more young married women are using contraception than are pregnant or wishing to become pregnant.

28. Contraceptive use among young married women is highest in Latin America and the Caribbean, where half of married women aged 15-19 use contraception (37 per cent use to space and 13 per cent use to limit) and 62 per cent of married women aged 20-24 use contraception (36 per cent use to space and 26 per cent use to limit) (see figure X). In both Africa and Asia, contraceptive use among married women aged 15-19 is considerably lower, at 12 per cent and 20 per cent, respectively. In both regions contraceptive prevalence nearly doubles by age 20-24, to reach 24 per cent in Africa and 38 per cent in Asia.

29. In contrast to contraceptive prevalence, unmet need for contraception is similar in all regions and slightly higher among married women aged 15-19. For the latter, unmet need ranges from 22 per cent in Latin America and the Caribbean to 25 per cent in Asia. For women aged 20-24, unmet need is lowest in Latin America and the Caribbean at 17 per cent and highest in Africa at 25 per cent. Unmet need among young married women is especially high in Africa, where it is double the level of contraceptive use for those aged 15-19 and slightly higher than contraceptive use among those aged 20-24. In Asia, unmet need surpasses contraceptive use among married women aged 15-19.

Figure X

Contraceptive prevalence and unmet need for contraception among women aged 15-19 and 20-24, by purpose

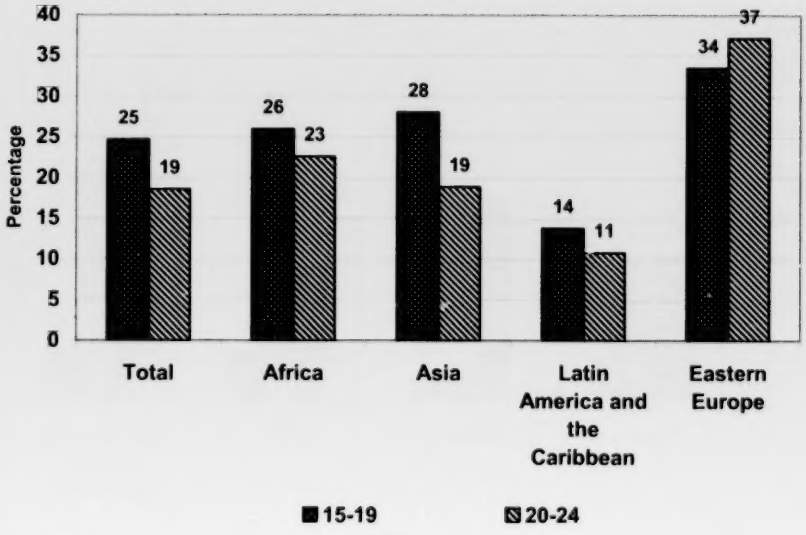


30. Young married women aged 15-19 use contraception primarily to space births. Thus, 83 per cent of contraceptive users in that group wish to lengthen the intervals between births. As women reach the number of children they desire, more of them use contraception to limit family size; consequently, the proportion using contraception for limitation purposes increases with age while the proportion using it for spacing purposes diminishes. Among women aged 20-24, 42 per cent of contraceptive users wish to limit family size. The desire to limit family size is lowest in Africa, where just 17 per cent of contraceptive users aged 20-24 reported that objective. Use of contraception for limitation purposes is high in Asia, reaching 48 per cent among those aged 20-24, and in Latin America and the Caribbean, where 42 per cent of contraceptive users aged 20-24 wish to stop childbearing altogether and, remarkably, 25 per cent of those aged 15-19 wish the same.

31. Most young women having an unmet need for contraception also wish to space births rather than limit family size. Thus, 92 per cent of married women aged 15-19 in Africa and Asia with an unmet need for contraception want to delay the next pregnancy. The equivalent figure in Latin America and the Caribbean is 80 per cent.

32. Not only is there a significant unmet need for contraception among young women who are not using any method but, in addition, large proportions of contraceptive users still rely on traditional methods of contraception which are less effective than modern methods (see figure XI). In the 83 countries reporting data on the type of method used, 25 per cent of contraceptive users aged 15-19 rely on a traditional method, as do 19 per cent of those aged 20-24. In addition, in all developing regions, younger women are more likely to use traditional methods than those aged 20-24.

Figure XI
Percentage of contraceptive users relying on traditional methods



33. Demand for contraceptives is also significant among unmarried, sexually active young women, who have a greater interest in preventing pregnancy and are therefore more likely than married women to use contraception. Among the 62 countries reporting relevant data, in all but five countries contraceptive prevalence among sexually active unmarried women aged 15-19 surpassed that of their married peers, and it did so among women aged 20-24 in all but 10. In 30 countries, however, including 22 in Africa, fewer than half of sexually active women aged 15-19 were using contraception, and in 17 countries, including 12 in Africa, the same held true for sexually active women aged 20-24. Overall, in the 62 countries considered, about 10 per cent of unmarried women aged 15-19 were sexually active and using contraception, and 27 per cent aged 20-24 were doing so. Although use of modern contraception was common, 23 per cent of the unmarried contraceptive users aged 15-19 and 16 per cent of those aged 20-24 relied on traditional methods and, in Africa, those figures rose to 29 per cent and 20 per cent, respectively.

34. In sum, many women aged 15-24 are already using contraception to delay or space pregnancies. At the same time, large numbers of young women still have an unmet need for contraception to space births and significant numbers rely on traditional methods, especially those living in Africa and those aged 15-19. Furthermore, a high proportion of unmarried young women are sexually active but not using contraception. The result is that more than 6 million unintended pregnancies occur annually in developing countries[7] and often end in unsafe abortion. Improving access to family planning for all adolescent and young women who need it is an effective strategy to reduce the number of unintended pregnancies and unsafe abortions. Governments have the responsibility to enable young people to have the means to build their families responsibly.

VI. Health of adolescents and youth

35. Adolescence is generally the healthiest period in life, when human beings reach their peak in strength, speed, fitness and many cognitive abilities. Puberty is also a period, however, when major physiological changes occur and health risks with potentially life-threatening consequences become prominent.[8] Adolescent behaviours with long-term implications for health include smoking, drinking and the use of illicit drugs. Eating and exercise habits also become set during this period of life. Reproductive maturity and the initiation of sexual activity expose young people to the risk of contracting sexually transmitted infections, including HIV. For adolescent women, early pregnancy and childbearing are associated with higher risks of morbidity and mortality, particularly in developing countries. For male adolescents and young men, the risks of injury increase, especially because they are more likely than young women to be involved in traffic accidents, violence or war. Puberty is also the time of onset of certain mental disorders that increase the risk of

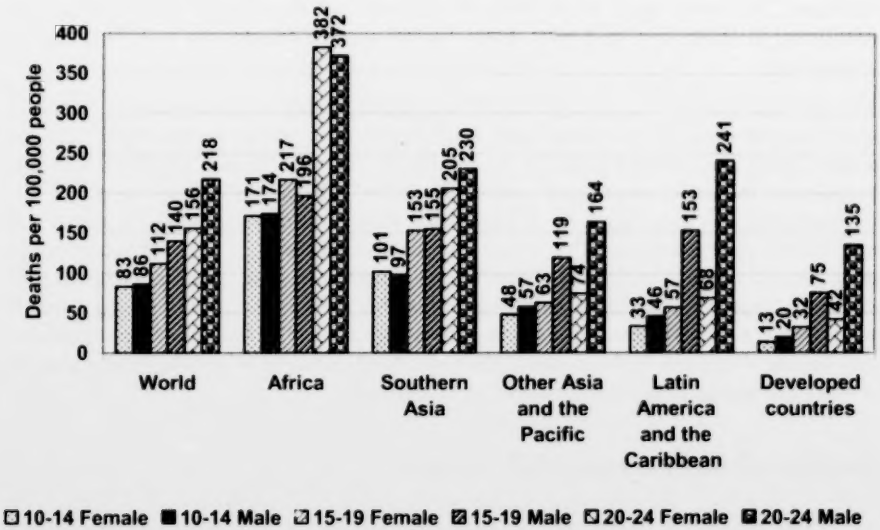
[7] Guttmacher Institute and International Planned Parenthood Foundation, "Facts on the sexual and reproductive health of adolescent women in the developing world", June 2010. Available from www.guttmacher.org/pubs/FB-Adolescents-SRH.pdf.

[8] Unless otherwise indicated, the data presented in sect. VI were derived from special tabulations of the mortality estimates by cause, age and sex for 2008 produced by the World Health Organization. Available from www.who.int/healthinfo/statistics/mortality/en/index.html.

suicide. The result is a morbidity profile that changes markedly from early adolescence to young adulthood.

36. In most populations, mortality is lowest between ages 10 and 14. Globally, the death rate of males aged 10-14 is 86 per 100,000, and that of females 83 per 100,000 (see figure XII). After those ages, mortality increases markedly, but the increase is steeper for males than for females. Thus, the death rate among males aged 20-24 is 2.5 times higher than that of males aged 10-14, while for females the death rate of those aged 20-24 is 1.9 times higher than those aged 10-14.

Figure XII
Death rate by age, sex and region, 2008 (per 100,000)



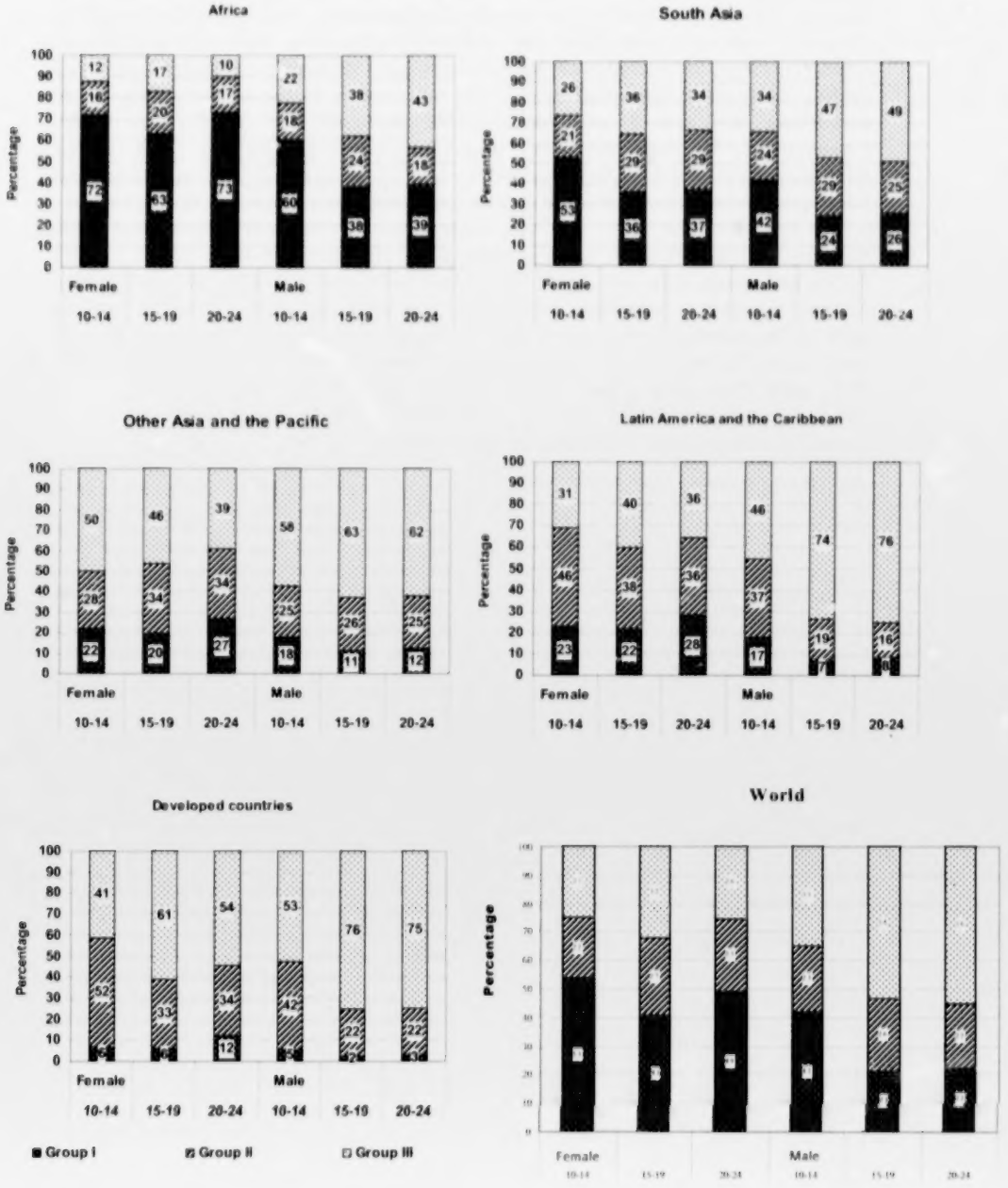
37. Death rates among adolescents and youth are generally higher among males than among females, often by large margins. The exceptions are death rates among females aged 15-24 in Africa and 10-14 in South Asia. In Africa, high levels of maternal mortality and the prevalence of HIV/AIDS are largely responsible for maintaining the higher mortality of young women. In South Asia, the low status of women is the root cause of the relatively high mortality of adolescent and young women, leading to early marriage, early childbearing and insufficient access to health services. In the rest of Asia and the Pacific, in Latin America and the Caribbean and in developed countries, mortality among females aged 15-24 is markedly lower than that of males. The high mortality of young males and its rapid rise with age owes much to the increasing death toll caused by injuries, including road traffic accidents, homicides and suicides.

38. The World Health Organization (WHO) classifies the causes of death into three groups. Group I includes infectious and parasitic diseases, respiratory infections and maternal and perinatal conditions.[9] Group II encompasses non-communicable diseases, including neoplasms, or cancer; cardiovascular, respiratory and digestive diseases; diabetes, nutritional and endocrine disorders, and neuropsychiatric disorders. Group III includes all injuries, whether intentional or unintentional. The decline in mortality achieved since 1950 owes much to the success achieved in controlling the spread of communicable diseases and in treating them. Consequently, in most countries today, communicable diseases cause a low proportion of all deaths. Major exceptions are countries in sub-Saharan Africa and South Asia, where communicable diseases are still major causes of death. Because people aged 10-24 are less likely than older persons to die from non-communicable diseases, communicable diseases account for a high share of their deaths in both Africa and South Asia (see figure XIII). In Africa, communicable diseases, which include maternal causes and HIV/AIDS, are still the major killer of women aged 10-24, causing 70 per cent of their deaths and 44 per cent of the deaths of their male peers. In South Asia, communicable diseases cause 40 per cent of female deaths and 29 per cent of male deaths of those aged 10-24. Globally, 47 per cent of female deaths and 26 per cent of male deaths of those aged 10-24 are due to communicable diseases, including maternal causes.

[9] The term "communicable diseases" is used here to refer to group I causes, while recognizing that many maternal and perinatal deaths are not due to infectious causes. The term "non-communicable diseases" refers here to all group II causes, even though some cancers, for example, have been shown to have infectious origins.

Figure XIII

Percentage distribution of deaths by major cause, age and sex, 2008



39. Ninety per cent of maternal deaths of women aged 15-24 occur in Africa and South Asia. Early childbearing, high fertility and the lack of access to adequate maternal health services, including trained birth attendants, contribute to the high number of maternal deaths in those regions. In addition, maternal mortality and morbidity in adolescents is a major public health challenge in the majority of developing countries. Women aged 15-19 are twice as likely to die during pregnancy or childbirth than their peers aged 20-24. Recourse to abortion under unsafe conditions that endanger the lives of women is another major health concern. An estimated 3 million unsafe abortions among women aged 15-19 occurred in 2008.[10] Preventing them requires reducing the incidence of unintended pregnancies among adolescent women, especially by facilitating their access to modern contraception.

40. A major cause of death in Africa is HIV/AIDS. In 2008, Africa accounted for 83 per cent of deaths of those aged 10-24 caused by HIV/AIDS. The Joint United Nations Programme on HIV/AIDS (UNAIDS) estimates that 3.4 per cent of women aged 15-24 in Africa and 1.4 per cent of their male counterparts are living with HIV, but prevalence varies markedly among countries.[11] In the highly affected countries of Botswana, Lesotho, South Africa and Swaziland, between 12 and 16 per cent of women aged 15-24 are living with HIV. Because the epidemic began in the 1980s or 1990s in most countries, children who acquired HIV from their mothers are among the adolescents and youth living with HIV today. With increasing usage of antiretroviral therapy, the number of perinatally infected children who survive to adolescence and young adulthood will grow. In general, however, most people acquire the disease through unprotected sexual intercourse.

41. Injuries are a major killer of young people and are a special threat for young men. Globally, injuries cause 51 per cent of male deaths and 28 per cent of female deaths of those aged 10-24. Injuries cause most deaths among males aged 10-24 in developed countries (73 per cent), Latin America and the Caribbean (72 per cent), and Asia (not including South Asia) and the Pacific (62 per cent), and they are also the major killer of females aged 10-24 in developed countries, causing 55 per cent of their deaths. In South Asia, injuries cause a higher percentage of deaths among young males than communicable diseases (45 per cent versus 29 per cent) and they are the second most important cause of death for females, accounting for 33 per cent of deaths of females aged 10-24. Even in Africa, 36 per cent of deaths of males aged 10-24 are caused by injuries.

42. Injuries are classified as intentional and unintentional. Intentional injuries include suicide and homicide, whether by violence or by war. Unintentional injuries comprise all accidents, including road traffic accidents, poisonings, drownings, fires and falls. Globally, the share of unintentional injuries among all injury deaths among those aged 10-24 is the same for males and females, at 63 per cent. Unintentional injuries account for the major share of deaths from injury among both young males and young females in all regions except Latin America and the Caribbean, where intentional injuries, mostly from violence, are the major killer of young men, accounting for 60 per cent of deaths from injury of males aged 10-24, with violence alone being responsible for 50 per cent. Violence kills five times more

[10] WHO. *WHO Guidelines on Preventing Early Pregnancy and Poor Reproductive Health Outcomes Among Adolescents in Developing Countries* (Geneva, 2011).

[11] UNAIDS. *Global report: UNAIDS report on the Global AIDS Epidemic 2010* (Geneva, 2010).

males than females among those aged 10-24, and 69 per cent of deaths from violence occur in Africa and Latin America and the Caribbean.

43. Road traffic accidents kill four times more males than females among those aged 10-24 and, globally, they account for 30 per cent of male deaths from injuries at those ages. The toll of road traffic accidents is particularly important among both young men and women in developed countries and among young men in Asia not including South Asia and the Pacific. Suicide, another important cause of death from injury among young people, is especially high in Asia, where 75 per cent of all suicides in the world occur. In South Asia, 40 per cent of all deaths from injuries among females aged 10-24 are suicides.

44. Given that the major causes of death among adolescents and youth vary considerably among regions and countries, a wide array of interventions must be considered to reduce mortality and morbidity at young ages. They are outlined in the recommendations included in section VIII below.

VII. International migration of youth

45. In 2010, the world had 214 million international migrants, of which 35 million were aged 10-24. As in the overall population, the proportion of people aged 10-24 in the migrant population has been decreasing. Furthermore, the migrant population's share of adolescents and youth is smaller than that of the overall population — 17 per cent versus 26 per cent — indicating that the migrant population is older.

46. Half of the international migrants aged 10-24 live in developed countries, compared to 60 per cent of the total migrant population. By contrast, all developing regions have higher shares of the migrants aged 10-24 than their respective shares of the overall migrant population. The higher concentration of migrant adolescents and youth in developing regions also gives rise to younger migrant populations in those regions. That is, the share of migrants aged 10-24 among all migrants is higher in all developing regions, where it ranges from 19 per cent in Asia and the Pacific to 26 per cent in Africa, than in developed countries, where it is a low 14 per cent.

47. The proportion of females in the overall migrant population, at 49 per cent, is higher than the proportion of females among migrants aged 10-24, at 48.4 per cent. However, in the developing regions, young girls and women constitute a higher percentage of migrants aged 10-24 than they do among all international migrants. Thus, 52.5 per cent of migrants aged 10-24 in Africa are female, whereas females constitute 46.8 per cent of all international migrants in that region. In developed countries, the reverse holds true: the female share of the overall migrant population, at 51.5 per cent, is higher than that of migrants aged 10-24, which is 48.9 per cent.

48. Estimates of the net number of people aged 10-24 who moved from their countries of birth to other countries during the period from 2000 to 2010, and whose ages in 2010 ranged from 20 to just under 25 years, amounted to 6.9 million — 62 per cent of whom moved to developed countries. Compared to the period from 1990 to 2000, the size of that flow increased by 28 per cent during the period from 2000 to 2010. In addition, persons aged 15-24 who migrated also contributed to the net increase of migrants aged 25-29 in 2010, which amounted to 9.1 million.

49. Young people migrate for different reasons. Adolescents under 18 may migrate while accompanying their parents or to reunite with them. Young people may also migrate to study abroad. According to the United Nations Educational, Scientific and Cultural Organization, 2.8 million foreign students were pursuing tertiary education abroad in 2008, 49 per cent of whom were in Europe, 22 per cent in North America, 15 per cent in Asia and 9 per cent in Oceania. Most of those students originated in developing countries, including 53 per cent in Asia, 12 per cent in Africa and 6 per cent in Latin America and the Caribbean. The 31 per cent originating in developed countries included 25 per cent from European countries and 3 per cent from Canada and the United States of America.

50. Although the level of youth participation in labour migration cannot be quantified owing to the lack of data by age, indirect evidence suggests that young people may account for a significant proportion of migrant worker admissions. Even when young people migrate for reasons other than employment, they often work abroad. However, like their native peers, young migrants are likely to experience high unemployment, and they often have higher unemployment rates than natives, partly because they lack fluency in the local language. Studies in selected countries suggest that when persons migrate as children, they are more likely to adapt to the host society and become fluent in the local language — a major advantage in later life. When migrants move as teenagers, language acquisition is more difficult and access to educational opportunities at their destination becomes more crucial to ensuring a successful adaptation.

VIII. Conclusions and recommendations

51. **In countries where high proportions of girls marry before age 18, Governments need to develop and implement culturally sensitive programmes to promote marriage at later ages, including programmes that focus on reducing the practice of dowry and bride wealth payments. Governments should also examine their laws on marriage to ensure that they grant men and women "the same right freely to choose a spouse and to enter marriage only with their free and full consent", as established by the Convention on the Elimination of All Forms of Discrimination against Women. Ensuring that the courts follow through with the enforcement of existing laws is also important. Ultimately, improving living conditions for the poor and supporting adolescents, particularly girls, in continuing their education are crucial to reducing incentives to marry at very young ages.**

52. **Because sexual activity among young people is a reality, there is an urgent need to empower them to make responsible decisions regarding their sexual lives by improving their negotiating skills, addressing gender double standards, developing supportive family and institutional environments and taking measures to prevent intimate partner violence and all forms of sexual violence. Programmes on sexuality education and HIV prevention deserve support because they give adolescents an understanding of what responsible sexual and reproductive behaviour entails and the skills to help them achieve it.**

53. **Special efforts are needed to provide family planning services to young women and men, whether they are married or unmarried. In developing strategies to reach young people, account must be taken of their diversity of**

circumstances, since some may attend school while others do not, some might work while others might not and some may be parents already. Community-based reproductive health programmes with multiple components permit using several strategies to reach young people and to sensitize community leaders and parents. To be effective, those programmes must be culturally appropriate, sensitive to the expressed needs of adolescents and youth and built on the strength of local institutions.

54. Sexual and reproductive services should be an integral part of the minimum health-care package offered to adolescents and young people at all levels of the health-care system, but particularly under primary care. In order to reach low-income youth, legal, financial and cultural obstacles that prevent or limit their access to sexual and reproductive health-care services should be removed. Young pregnant women should receive a package of care that includes at least four antenatal visits to maternal care facilities, the attendance of skilled personnel at delivery, the use of proper equipment and medications, the capacity to refer and transport them to emergency obstetric services if complications arise and post-natal follow-up and counselling.

55. A combination of strategies is necessary for HIV/AIDS prevention and treatment among young people. They include increasing knowledge of the mechanisms of transmission and of all ways of preventing infection, especially for young people at higher risk of infection; developing accessible youth-friendly services, in particular by training health personnel to be non-judgemental in caring for young people, including young people living with HIV; promoting voluntary counselling and testing and offering antiretroviral therapy for those who need it; providing diagnosis and treatment of other sexually transmitted infections; and implementing public education campaigns to reduce stigma and foster a safe and supportive environment.

56. In low-income countries, it is still crucial to combat infectious diseases, particularly tuberculosis and lower respiratory tract infections that account for numerous deaths among young people but fail to attract sufficient policy attention.

57. Improving health and health prospects demands action outside the health system. Preventing tobacco use among young people, for instance, can be achieved not only through education campaigns about the risks associated with smoking but, especially, by increasing the price of cigarettes through taxation. Prevention of alcohol abuse can be achieved by raising the prices of alcoholic beverages, banning or reducing advertising directed at young people and adopting and enforcing laws banning the public consumption of alcohol by minors.

58. To reduce road traffic accidents, preventive measures include investment in road infrastructure, the compulsory use of seat belts in cars and helmets when using motorcycles and the enforcement of legislation prohibiting driving after drinking alcohol or under the influence of drugs.

59. Because firearms are responsible for the vast majority of deaths caused by violence, strengthening gun control laws can contribute to reducing mortality among the young.

60. To the extent that unemployment is at the root of social problems affecting youth, and considering that unemployment and poverty rates, even for those who are employed, are especially high among youth, Governments should pay particular attention to policies and programmes that foster decent work opportunities for young people.

61. Facilitating migration for education can bring benefits beyond the improvement of educational attainment. Young migrant students can become bridges between societies and cultures. Their migration facilitates the transfer of know-how and expertise. The skills they acquire as they adapt to the host society can empower them to function more effectively in a globalized world. To derive the greatest benefits from such migration, countries of origin can promote their return by actively maintaining links with students abroad and facilitating the search for jobs at home upon the completion of training.